

LOCAL BANKRUPTCY FORM 2016-2(c)

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**

IN RE:

RACHEL MARIE HIREL
AKA RACHEL MARIE MOLITORIS

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CHAPTER 13

CASE NO. 5 - 24 -bk- 03254

Debtor(s)

AMENDED REQUEST FOR PAYMENT OF CHAPTER 13 COMPENSATION AND EXPENSES

Instructions: Complete **Part A** for payment of the presumptively reasonable fee, as described in L.B.R. 2016-2(c), being paid through a Chapter 13 plan and reimbursement of expenses. Complete **Part B** for payment of compensation and reimbursement of expenses awarded by separate Court order. Complete **Part C** for all requests for payment of compensation and reimbursement of expenses.

A. Presumptively reasonable fees under L.B.R. 2016-2(c)	
1. Amount agreed to by debtor	\$ 5,000.00
2. Less amount paid to attorney prior to filing petition	\$ 0.00
3. Balance of compensation to be paid through plan distributions	\$ 5,000.00
4. Expenses advanced to be paid through plan distributions: (describe expense and amount) Appraisal	\$ 475.00

B. Compensation and reimbursement of expenses allowed upon application and order under LBR 2016-2(a)	
1. Retainer received	\$
2. Compensation earned prepetition and paid to attorney prior to filing petition	\$
3. Expenses reimbursed prepetition	\$
4. Balance in retainer after deduction of prepetition compensation and expenses	\$
5. Compensation and expenses to be approved by the Court and to be paid through plan distributions, less balance in client trust account	\$

C. The undersigned hereby requests payment through the plan for compensation and reimbursement of expenses under 11 U.S.C. § 503(b)(2) in the following amount based on the information above:	\$ 5,475.00
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Dated: 2/10/2025

s/John Fisher, Esq.

Attorney for Debtor

INVOICE**FROM:**

JJ Mantione Appraisal & Realty Group, Inc.
389 Wyoming Ave.
Wyoming, PA 18644-1653

Telephone Number: (570) 613-9080

Fax Number: (570) 613-9081

TO:

Rachel Hirel
c/o John Fisher, Esq
126 S Main St Pittston, PA 18640

E-Mail:

Telephone Number:

Fax Number:

Alternate Number:

INVOICE NUMBER

M1-7281

DATES

Invoice Date: 02/08/2025

Due Date:

REFERENCE

Internal Order #: M1-7281

Lender Case #:

Client File #:

FHA/VA Case #:

Main File # on form: M1-7281

Other File # on form: M1-7281

Federal Tax ID:

Employer ID:

DESCRIPTION

Lender: Rachel Hirel
Purchaser/Borrower: Rachel Hirel
Property Address: 10 Jean St
City: Wilkes Barre
County: Luzerne
Legal Description: Deed book 3024 page 245576

Client: Rachel Hirel

State: PA Zip: 18702

FEES**AMOUNT**

475.00

SUBTOTAL

475.00

PAYMENTS**AMOUNT**

Check #: 1782 Date: 02/08/2025 Description: Pd (1900)
Check #: Date: Description:
Check #: Date: Description:

475.00

SUBTOTAL

475

TOTAL DUE

\$

0.00